

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION <i>CM</i>	INITIALS <i>MAB</i>	ID NO. <i>878</i>	DATE <i>9-21-98</i>
FEE DETERMINATION <i>SA</i>		<i>71058</i>	<i>6-30-98</i>
O.I.P.E. CLASSIFIER <i>1016</i>		<i>3-7</i>	<i>7-1-98</i>
FORMALITY REVIEW <i>UNM</i>	<i>108031</i>		<i>7-14-98</i>

INDEX OF CLAIMS

Rejected	N	Non-elected
Allowed	I	Interference
- (Through numeral) Canceled	A	Appeal
÷ Restricted	O	Objected

Claim	Date
Final	
Original	
1	✓ ✓ ✓ ✓ ✓ ✓
2	✓ ✓ ✓ ✓ ✓ ✓
3	✓ ✓ ✓ ✓ ✓ ✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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